EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL'S EXPENDITURE REPORT

| EMPLOYER COVERING JANUARY 1 THRO COVERING JANUARY 1 THRO | VPRINCIPAL 'S EX FORM 500 DUGH JUNE 30, 2008 - DUE A DUGH DECEMBER 31, | UGUST 15 | | EPORT |
|--|---|---------------|-----------------------|---|
| Pursuant to LSA-R.S. 49:76G(2)(a), an a required by Title 49 on behalf of <u>all</u> of i exercised this option by timely filling the of their registered executive lobbylses. | | | | |
| Hand deliver or mail to: 2415 Quail I OR Fax to: (225) 753-8787 or (225) 783 | | 70808 | | |
| EMPLOYER/PRINCIPAL AstraZena BUSINESS ADDRESS 1800 Concord 6 | ca Phermaceuticals, LP | ton Delawa | | FOR OFFICE USE ONLY Postmark Date: (18) |
| Street and No. | <u> </u> | State | Zip | lest (sping) |
| MAILING ADDRESS_Same as above | | | - 'p | |
| Street and No. | City | State | Zιρ | 000400 |
| 3. CONTACT PERSON: Fish | Amber | | ĸ. | 3061307 |
| Last | First | | MI | |
| | mit Street, Suite 100 Akron, | Ohio | 44308 | <u> </u> |
| (If different from above) Street and No. | City | State | Zip | |
| 5. PHONE NUMBER (330) 761-9960 | | | | |
| Area C | ade and Phone Number | | | |
| 6. List the names and executive lobbyist of | egistration numbers of the tobbyis | ts on whose t | iehalf this reno | rt is filed: |
| 1) Name: Barnett | Stephanie | | | |
| Last | First | | MIT EXEC | .ID.#_212 |
| 2) Name: Barrow | 'Patricia | | L. EVEA | 7 11 |
| Last | First | | <u></u> EXEC. | .ID.#_ 211 |
| 3) Name: Bauer | Scheibie | | A. EVEO | 91 7 |
| Less | Flrst | | <u>ru</u> EXEC. Mi | ID.# 217 |
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| Last | First | MI | |
| Name; Burleigh | Julie | G. | EXEC.ID.# 203 |
| Lask | First | · . <u> N.</u> _ | EXEC.10.#_221 |
| Name: Braun | Amy | MI | |
| Name: Braud | : : Jeffrey : | <u>M</u> , | EXEC.ID.# 195 |
| _ - , | first | Mi | |
| Name: Bonin | | B | EXEC.(D.# 199 |
| Lest | First | MI | |
| Name: Biletan | Beth | ₩. | EXEC.ID.# 230 |
| | First | МІ | EXEC. 10,9 = 1 |
| Last | Keith | A. | EXEC. ID. # 271 |
| Name; Bird | | MI | EXEC.(D.#_242 |
| | First | <u>A</u> _ | |

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| C | | | |
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| 4) Name: Campo | Steven | <u>M.</u> _ | EXEC.ID.# 205 |
| Last | First | MI | |
| 5) Name: Cantrelle | Kevin | м. | EXEC.1D.# 315 |
| Last | First | · MI | |
| 6) Name: Capiel | David | М. | EXEC.ID.# 207 |
| Last | First | МІ | |
| 7) Name: Carter | Susan | т. | EXEC.ID.# 220 |
| Lest | First | MI | EXCUID.# === |
| 8) Name: Cordell | Mleti | \$. | EVEO ID # 270 |
| Last | First | <u>v.</u> | EXEC.ID.#_270 |
| 9) Name: Cyrus | Кепу | J. | EVEA 15 4 248 |
| Last | First | | EXEC.ID.# 216 |
| 10) Nama: Damall, Sr. | Robert | C. | 233 |
| Last | First | | EXEC.ID.# 233 |
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| 4) Name: Eley, Jr. | James | W. | EXEC.ID.# 234 |
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| Lest | First | M) | -ACCID.404 |
| 5) Name: Finley | Bart | 8. | EXEC.ID.# 214 |
| Last | First | | . EAEU.ID# 217 |
| 6) Name: Fowler | Lisa | L. | EXEC.ID.# 235 |
| Lagg | First | MJ | EXEC.ID.# |
| 7) Name: George | Cherles | E. | EXEC.ID.# 200 |
| Last | First | — —— <u>-</u> :— Мі | EXEC.ID.J 200 |
| 8) Name: Guerriero | Luke | W. | EXEC.ID.# 228 |
| Last | First | MI | EXCUID# ==- |
| 9) Name: Hall | Allison | C. | EXEC.ID.# 215 |
| Last | first | MI | CAECILIA 410 |
| 10) Name: Hebert | Mark | A. | EXEC.ID.# 210 |
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| 4] Name: Helmke | Rachel_ | R, | EXEC.ID.# 244 |
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| Last | First | MI | |
| 5) Name: Hohorst | Ashley | A. | EXEC.ID.#. 219 |
| Last | First | : МI | EXECUIDIB |
| 6) Name: Hull | Dennis | R, | EXEC.ID.# 243 |
| Lést | First | | EXEC.ID.#_==== |
| 7) Name: Humphries | Judi | P. | 040 |
| Last | First | | EXEC.ID.# 249 |
| 6) Name: Kleinpeter | Stephen | M, | 005 |
| Lest | First | —— - | EXEC.ID.# 225 |
| 9) Name: Liles | Jesska | | |
| Last | First | F. MI | EXEC.(D.#. 198 |
| 10) Name: Manguno | Rebecca | | |
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Page 5 of 249

Form508, Rev. 7/04

| 4) Name: Mayer | Amy | _ | |
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| Last | First | — ·—· F. Mi | EXEC.ID.#_197 |
| 5) Name: McAllister | Charles | | |
| Last | | | EXEC.ID.#_208 |
| 6) Name: McCullough | | MI | |
| Last | Candage | L | EXEC.ID.# 201 |
| 7) Name: McDonald | • | IM | — — - . |
| Last | Michael | J | EXEC.ID.# 269 |
| - | First | МІ | |
| 8) Name: Milton | Rebecca | В. | EXEC.10.# 229 |
| Lest | First | MI | |
| 9) Name: O'Toola Benolt | Karen | A. | EVEA 10 4 201 |
| Last | First | MI | EXEC.ID.#_301 |
| 10) Name: Puckett | Chad | E. | 200 |
| Lest | First | —— <u>—</u> | EXEC.ID.#_228 |
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| _ | Signature of Employer/Principal or Re | presentativa | |
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Page 6 of 248

Form508, Rev. 7/04

| | | Signature of Employer/Principal or Represer | tativa | _ |
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| ٨ | lame: Smith | Clark | E. | EXEC.ID.# 250 |
| n | Last | <u>Amy</u> | C. | EXEC.ID.# 231 |
| p.o | ame: Sins | First | М | _ . |
| N | erne; Silvio Last | Jeffrey | _D | EXEC.(D.# 213 |
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|) N | eme: Seay | Nicholas | Н. | EXEC.ID.# 314 |
| | Last | First | MI | EXECTION TOO |
| i) N | ame: Rossie | Tracey | S. | EXECID.≱ 206 |
| | Lest | First | | EXEC. 10.# 202 |
| 5) A | lame: Rareshide | Jennifer | | Even in a 202 |
| | Last | Firu | MI | EXEC.ID.# 196 |

B.

| 4) Name: Soileau | William | <u>L.</u> | EXEC.ID.# 218 |
|--|--|--|---|
| 5) Name: Spencer | | МІ | |
| Last | Adriane | | . EXEC.ID. <u>#_438</u> |
| | First | МІ | |
| 6) Name: Tergerson Last | Michael | D. | EXEC.ID.# 241 |
| | First | MI | |
| 7) Name: Townson | Jennifer | _ L. | EXEC.ID.≢ 209 |
| Last | First | MI | |
| 8) Name: Triplett | David | W. | EXEC.(D.# 224 |
| Lant | First | MP | EXECUID. 4 |
| 9) Name: Usla | Kenneth | J. | EXEC.ID.# 223 |
| Last | First | MI | LALU, ID. F |
| 10) Name: Viator | Lori | L. | EXEC.ID.# 222 |
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| a. Total of all executive lobbying ex (Include expanditures from Schedule). b. Total of all executive lobbying ex (When Applicable). (Include expendicular expensive ex | penditures made Jenuary 1 through June 30: les A and B) penditures made July 1 through December 31: nditures from Schedulas A and B) penditures made during calendar year: squal Line "c") RM for each of your registered executive lobby CERTIFICATION OF ACCURACY formation contained herein is true and indibelief; and that no information required. | \$ Second to the | ggregata total of all exper |

8.

| 4) Namet, Wall | Stephan | _ | |
|--|---|-------------------|---|
| Last | First | — <mark>E.</mark> | EXEC.ID.#_232 |
| 5) Name: Zaunbrecher | Therese | M | EXEC.ID.# 204 |
| 6) Name: Rosenau | \$amuel | MI C. | |
| - | First | MI | EXEC.ID.#_362 |
| 7) Name: Schifer | | | Suco in . |
| | First | MI | EXEC.ID.# |
| 8) Name:N <u>/A</u> | | | EXEC.ID.# |
| 9) Name:_ <u>N/A</u> | I N 3L | MI | —————————————————————————————————————— |
| | First | MI | EXEC.ID.# |
| 10) Name; | | | |
| Last | First | | EXEC.ID.# |
| PROVIDE BELOW: (a) the aggregate tot of all expenditures during the July 1 - Dece by the principal/employer in a calendar yea Total of all executive lobbying expenditures from Schedules | r. | (e) mic all | eporting period; (b) the apgregate total gregate total of all expenditures made ,754,34 |
| | di | s | |
| Total of all executive lobbying expens (Line "a" added to Line "b" should equal | ditures made during calendar year: I Line "c") | \$\$B1 | .754.34 |
| 8. COMPLETE AN ATTACHMENT FORM (| for each of your registered executive labbyls | ts. | |
| | CERTIFICATION OF ACCURACY | | |

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Employer/Principal or Representative

Adriana Speлcer

Print or Type Full Name

EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL 'S EXPENDITURE REPORT ATTACHMENT

This Attachment is to be used to complete Item #8 of Form 508, the report form for principals and employers who have elected to report on behalf of their executive lobbyists. Make as many copies of this form as needed for the completion of the expenditure report. Identify each page with a number and indicate the total number of pages being submitted.

| 1) LOBBYIST | Rosenau | Sam | uęl | C. | | EXEC ID # 382 | 2 | |
|-------------|--|---|--------------------------------------|--|--------------|----------------------|---------------|-----------|
| | Lest | First | | MI | | EXEC ID # | | |
| A | Total of all execu | tive lobbying expenditu (include expenditure) fo | ires made Janua om Schadules A | try 1 through June 36 and B) | 0: | \$ 269.B1 | | |
| | Total of all execu | tive lobbyling expendita (When Applicable) (Inc | ires made July ' iluda expenditur | 1 through December as from Schedules A ar | 31: ## B) | s_N/A | | _ |
| | Total of all execu | tive lobbying expenditu (Adding above expenditu | | | | <u>\$_289.91</u> | | |
| В. | Did this lobbylst | make an expenditure e | ceeding \$50 or | one occasion for an | ежесь | utive branch officia | ıl; | |
| | | nuary 1 through June 3 ly 1 through December | | es 🔲 | No No | ØÎ NA | | |
| | If the answer to e | ither question in B abo | ve is YES, comp | olete Schedule A and | attaci | h. | | |
| Ç. | Did this lobbyist | make expenditures exce | eding the sum | of \$250 for an execu | tive b | ranch official: | | |
| | From January 1 ti From July 1 throu | nrough June 30? Igh December 317 | Yes | No 【 | | иа 🗗 | | |
| | If the answer to a | aither question in C abo | ve is YES, com | piete Schedule A and | attac | h. | | |
| D. | Did this lobbyist executive branch | expend funds for any re officials were invited d | ception, social uring this repor | gathering, or other fi rting period? | unctio | in to which more t | han tw | enty-five |
| | | Yes 🗌 | No (| zl | | | 111 | |
| | If the answer to C | above is YES, complet | e Schedule B ar | nd attach. | | | ::- | |
| | | | | | | | : :: :-::: | - : · · · |

| 1) | í | a. Name of Department: Department of Education | |
|----|----|--|---------------|
| | 1 | b. Total of all expenditures made January 1 through June 30: | s_289.91 |
| | • | Total of all expenditures made July 1 through December 31: (When applicable) | sN/A |
| | • | Total of all expenditures made during the calendar year: | \$.289.91 |
| 2) | a | . Name of Department: N/A | |
| | | . Total of all expenditures made January 1 through June 30: | s |
| | | . Total of all expanditures made July 1 through December 31: (When applicable) | s |
| | d | . Total of all exponditures made during the calendar year: | \$_0.00 |
| 3) | В. | Name of Department: N/A | |
| | þ | . Total of all expenditures made January 1 through June 30: | s |
| | C. | Total of all expenditures made July 1 through December 31: (When applicable) | \$ |
| | đ. | Total of all expenditures made during the calendar year: | <u>\$0.00</u> |
|) | 8. | Name of Department; N/A | |
| | b. | Total of all expenditures made January 1 through June 30: | s |
| | c. | Total of all expenditures made July 1 through December 31: (When applicable) | s |
| | ď. | Total of all expenditures made during the calendar year: | s 0.00 |

E.

| Janu Jobb | uary 1 Dylst c | E BELOW (a) the name of the executive branch department and thedule; (b) the aggregate total of all expenditures attributable to - June 30 reporting period; (c) the aggregate total of all expendituring the July 1 - December 31 reporting period when applicabilities lobbylst in a calendar year attributable to the agency. | the agency made by this lobbyist during the |
|------------------|-------------------|--|---|
| 1) | ä | . Name of Department and Individual Agency:Department of | of Education, |
| | | Louisiana State University Health Sciences Center | |
| | t | a. Total of all expenditures made January 1 through June 30: | \$ 219.20 |
| | c | Total of all expenditures made July 1 through December 31: (When applicable) | <u>\$_N/A</u> |
| | d | . Total of all expenditures made during the calendar year: | \$_ 2 <u>19.20</u> |
| 2) | В | Name of Department and Individual Agency: Department of University Medical Center | of Education, |
| | b. | . Total of all expenditures made January 1 through June 30: | \$_70.71 |
| | C. | . Total of all expenditures made July 1 through December 31: (When applicable) | \$_N/A |
| | d. | Total of all expenditures made during the calendar year: | <u> 70.71</u> |
| 3) | 8. | Name of Department and Individual Agency: | |
| | b . | Total of all expenditures made January 1 through June 30: | <u> </u> |
| | Ċ. | Total of all expenditures made July 1 through December 31: (When applicable) | s |
| | d. | Total of all expenditures made during the calendar year: | \$_0.00 |
| 4) | a. | Name of Department and Individual Agency: | |
| | þ. | Total of all expenditures made January 1 through June 30: | \$ |
| | C. | Total of all expenditures made July 1 through December 31: (When applicable) | s |
| Form 50%, Rev. 7 | | Total of all expenditures made during the calendar year: Page 134_ of _249 | <u>s_0.00</u> |

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| | Rosenau Samuel | | | C. Exec. id #: 362 | | |
|---|--|---|--|---|--|--------------------------------|
| | nt | First | | MI Exe | LAGE. IQ F. | |
| SCHEDULE A | : EXP | ENDITURES I | OR EXECUTIV | E BRANC | CH OF | FICIALS |
| This schedule must be completed executive loobyists made either a exceeding \$250 for any one exe expenditure(s) and the aggregate lookyist should have his own Schezpenditures from the first half of expenditures from the first half of expenditures from the first half of the first ha | cultive branch totel of exper 1900ule Allif on | official during a repo oditures made on that in this required NOTE, o | rting period, then you mu | v on any one occ At provide the na | Attion or b) inse of uba | aggregate expenditure |
| 1. EXECUTIVE OFFICIAL'S NAME | I.ISTEO | ICIAL'S AGENCY AS IN THE EXECUTIVE EH SCHEDULE | S. ANOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEDING \$250 BETWEEN JANUARY 1 AND JUNE 80 | 4. AMOUNT C EXPENDITURE ON AN OFFICE WHOM YOU E SPENT OVER S ONE OCCASIO MAINE EXPENS EXCEEDING EXCEEDING EXCEEDING S BETWEEN JUL' DECEMBER 31 | S MADE IAL FOR ITHER 60 ON N OR DITURES 50 Y 1 AND | 5. TOTAL OF COLUMNS 3 AND 4 |
| uis A. Meza | Univer | sity Medical Center | \$70.71 | | _ | \$70.71 |
| | | | | | | |
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